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ABSTRACT

Intended for workers in Medicaid's Early and Periodic Screening Diagnosis and Treatment program, this booklet describes steps in providing EPSDT services. Focusing on methods of outreach and follow-up services, it concludes with a discussion of principles upon which effective client contact may be based. Section I outlines eight steps in the delivery of EPSDT services. Section II provides guidelines for initiating and maintaining client involvement in the medical care program. Section III discusses outreach procedures for identifying, informing and involving potential EPSDT clients. Follow-up procedures are suggested in Section IV. Discussion in Section V focuses on principles of effective client contact. The principles are illustrated by examples based on the experience of EPSDT workers and are followed by questions and answers to aid in understanding the proper application of the principles. Suggestions on how to handle specific tasks such as managing the initial contact with the client, using the telephone, and sending information through the mail are presented in appendices. (Author/RH)

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DELIVERING EPSDT SERVICES

Outreach and Follow-up in Medicaid's Program of Early and Periodic Screening Diagnosis and Treatment

PS 01121

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U. S. Department of Health, Education and Welfare
Health Care Financing Administration

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NOTE TO THE READER

Medicaid programs can vary among states. Each state establishes its own criteria of eligibility and defines its own package of services within federal guidelines. This booklet attempts to discuss some of the features of the Medicaid Early and Periodic Screening Diagnosis and Treatment program which are common to all states and to illustrate some variations in their implementation.

Although the term EPSDT is used throughout the booklet, the programs which provide periodic child health screening, diagnosis, and treatment may have different names in different states (e.g., Child Health Assurance Program—CHAP—in New York; Medi-Check in Illinois; Project Health in Michigan, etc.).

INTRODUCTION

Intended for EPSDT workers and their supervisors, this booklet describes the steps in providing EPSDT services. Focusing on methods of outreach and follow-up services, it concludes with a discussion of principles upon which effective client contact may be based. Suggestions about how to handle specific tasks are drawn from practice and presented in appendices.

SECTION I

STAGES IN THE DELIVERY OF EPSDT SERVICES

There are eight steps in the delivery of EPSDT services.

1. **Resources Organized.**
   Resources are organized to provide EPSDT services to eligible children. The worker should know how many people are to be served and what resources have been organized for them.

2. **Eligibles Identified.**
   Families receiving cash assistance under AFDC (Aid to Families with Dependent Children) are usually identified at the state level. Other eligible families are identified locally.

3. **Eligibles Informed.**
   Families receiving AFDC payments are notified at least once a year about the EPSDT program and informed about where and how to obtain services. Newly eligible families are also informed about EPSDT. Any eligible client can request EPSDT services.

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4. Screening Appointment Set.

An appointment for screening is made. Transportation and support services are provided. Reminders and rescheduling broken appointments are sometimes necessary.

5. Screening; and, 6. Diagnosis.

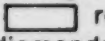
After screening has been completed, results are explained and clients with problems are scheduled for diagnosis. Often, diagnosis can be accomplished at the same time and place as screening or along with treatment.

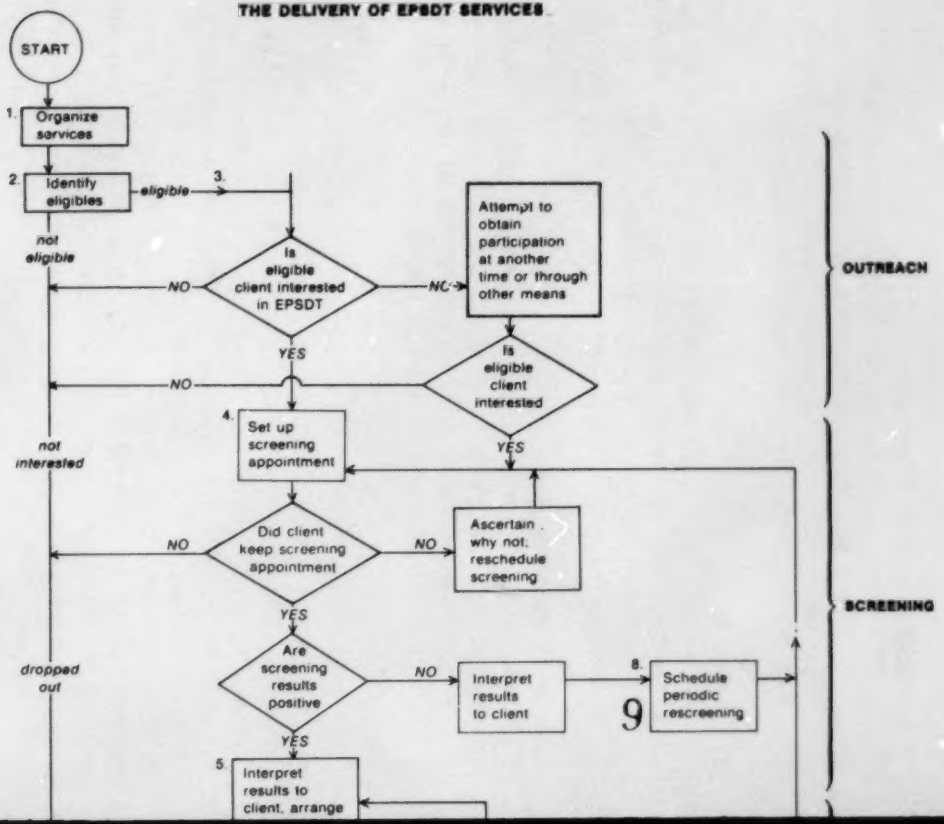
7. Treatment.

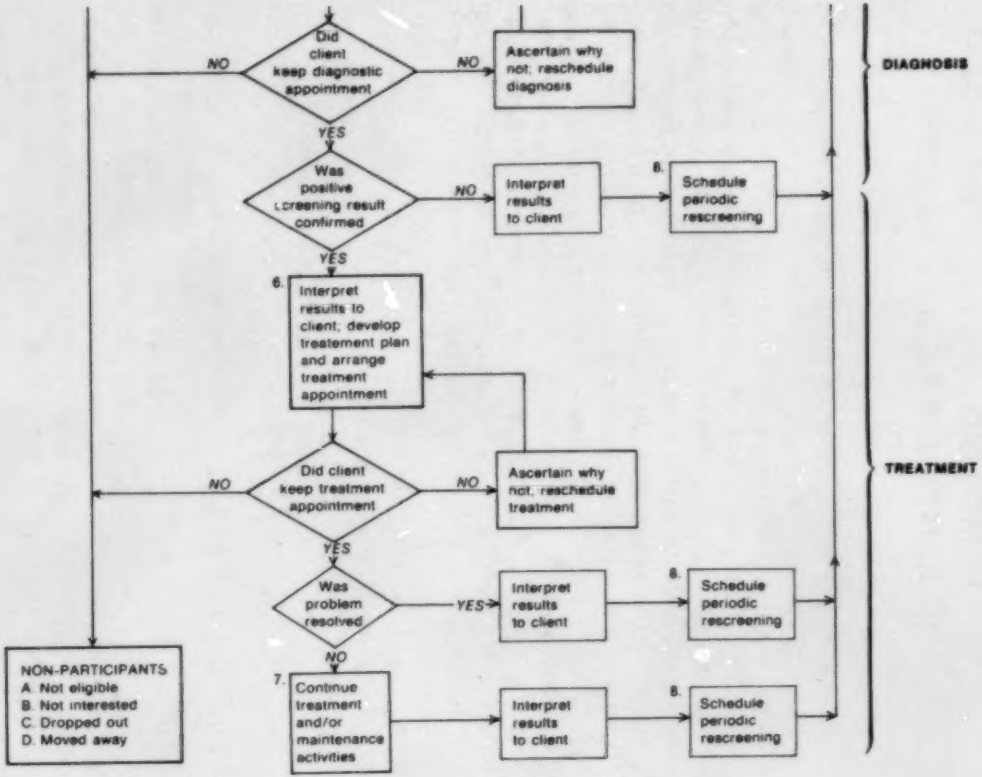
If health problems require continued treatment or maintenance, it is provided. If the problem is resolved or if no problem is found during screening, the client is scheduled for periodic rescreening.

8. Periodic Rescreening.

When a client needs no further health services, the client is scheduled for periodic rescreening according to the schedule specified in the state's EPSDT program. Periodic rescreening continues until age twenty-one.

Steps 1 and 2 involve getting the program under way; steps 3 and 4 are often referred to as outreach; steps 5-7 describe service delivery, which often entails a number of case management and follow-up tasks; step 8 is rescheduling periodic screening and needed services. In some EPSDT programs case management and follow-up tasks may be assigned to the same worker handling outreach; in other programs they may be done by different workers. In general, the requirements of these tasks are quite similar. To understand their organization and implementation, it may be helpful to follow a client through the EPSDT system of services as illustrated in the following diagram. To read the diagram, begin at the circle on the left-hand side. The boxes  represent various stages in the EPSDT program. The diamonds contain questions leading to decisions about how workers may best help their clients.


THE DELIVERY OF EPSDT SERVICES
START
1. Organize services
2. Identify eligibles
eligible
3.
not eligible
Is eligible client interested in EPSDT
NO
NO
Attempt to obtain participation at another time or through other means
YES
Is eligible client interested
NO
YES
OUTREACH
not interested
4. Set up screening appointment
Did client keep screening appointment
NO
NO
Ascertain why not; reschedule screening
YES
dropped out
Are screening results positive
NO
Interpret results to client
8. Schedule periodic rescreening
YES
5. Interpret results to client, arrange
SCREENING
9


Did client keep diagnostic appointment
NO
NO
Ascertain why not; reschedule diagnosis
YES
Was positive screening result confirmed
NO
Interpret results to client
8. Schedule periodic rescreening
YES
6. Interpret results to client; develop treatement plan and arrange treatment appointment
Did client keep treatment appointment
NO
NO
Ascertain why not; reschedule treatment
YES
Was problem resolved
YES
Interpret results to client
8. Schedule periodic rescreening
NO
7. Continue treatment and/or maintenance activities
Interpret results to client
8. Schedule periodic rescreening
NON-PARTICIPANTS
A. Not eligible
B. Not interested
C. Dropped out
D. Moved away
DIAGNOSIS
TREATMENT

SECTION II

REMOVING OBSTACLES TO PARTICIPATION IN EPSDT

As the preceding diagram suggests, initiating and maintaining client involvement in EPSDT may be difficult. Sometimes the difficulty lies with the client since a potential client may not understand the program's value and, even though the program is offered without charge, participation may be difficult for some clients. For example, some may be suspicious of the program or its staff due to past negative experiences with other social service or health programs. But for many clients, most of the obstacles to participation are part of the program itself: how it is structured; where it is located; how it treats clients. Administrative arrangements which cause delays, inconveniences, unnecessary effort, or impositions on clients, or even appear to do so, can reduce the client's willingness to participate. However, by following a few principles of good practice, EPSDT workers can help reduce or avoid some of these problems.

OVERCOMING OBSTACLES

Removing obstacles to participation in EPSDT generally does not require major reorganization of the program. Often, only slight modification of procedures are needed. The individual worker can be helpful by pointing out problems, discussing improvements with other staff, and helping clients over the rough spots. Whether necessary changes and adjustments are major or minor, the worker should know what to look for in removing obstacles. The following suggestions, drawn from the experience of EPSDT workers in many communities, highlight measures which can be taken for overcoming obstacles to participation.

- **If you can't provide all needed health care services close to a client's home, at least provide as many of these services as possible in the communities where eligible clients live.** *The closer the facility the easier the access.* Some communities use mobile screening units; others screen children in schools and day care centers. Public health nurses may visit clients in their homes, and some communities offer services in local gathering places such as churches, social clubs, and parks. The most common method for furnishing services, however, is to get the client involved with a provider of primary health care services (e.g., private physician) on an ongoing basis. This involvement is easier to sustain if the provider and client are in the same neighborhood.

- **Use simple and efficient administrative procedures.** *Avoid delays:* they are discouraging and increase the likelihood that appointments will be missed. While EPSDT workers may not be able to change the structure or administration of the program, they can suggest ways to *avoid unnecessary referrals* and suggest that as many services as possible be located in a single facility. EPSDT workers can also make sure that, if more than one provider is involved, each knows what is being done by other providers. Uncoordinated care is seldom the best care.

- **Make sure that facilities are accessible.** *EPSDT workers should help arrange for clients' transportation if needed.* Some communities use volunteers with cars; others arrange for groups of clients to use specially chartered busses or reimburse clients for public transportation. *Facilities should be open at convenient times,* not just during the day when children are in school. Evening and weekend hours may be essential for some families. EPSDT workers should work with their supervisors to make facilities as accessible to clients as possible.

- **Make certain that facilities are attractive.** *The health care facility should look pleasant.* Drab walls can be dressed up with plants, flowers, and posters. Again, this may be the reponsibility of program administrators, but EPSDT workers can make useful suggestions and take the initiative to improve the surroundings of program facilities which clients frequent. it is sometimes essential for a receptionist or someone on the staff to be of the same ethnic, racial, or cultural group as the bulk of clients; speaking the language helps, whether it be a dialect of English, relevant slang, or another tongue such as Spanish. If EPSDT workers speak another language they should make sure that their supervisor knows this, since this ability may be of benefit to the program.

- **Communication can improve service.** *Parents and providers should communicate with each other.* Parents need clear instructions. Health service providers need to be aware of parents' concerns and what suggested services might upset or cause problems for clients. *Parents can explain things to the child,* thus allaying the child's fears. This is especially true when uncomfortable tests are given or when equipment and facilities are strange. *Clients with a successful experience should spread the word to others.* EPSDT workers should encourage respected and trusted community people, clergy, social workers, etc., to advocate participation in the program and should explain the program to them. It may also be necessary for EPSDT workers to describe and explain the program to providers who have not heard about it or do not fully understand EPSDT. If workers do try to inform providers they should check with their supervisor first, since the program may already have a plan for reaching providers or may have special literature which workers could use.

- **Establish grievance procedures and let clients know what they are.** Encourage clients to complain, to ask

questions, and to air grievances. Complaints should be brought to the attention of EPSDT staff and discussed openly with the client. If they arise from misunderstanding, staff should give clear explanations. If they stem from procedural problems, staff should try to solve those problems and inform the client about the solution. Clients who feel helpless are not likely to continue with the program.

- **The client should feel comfortable with staff who can be advocates for the client's interests during screening, diagnosis, and treatment.** Client advocates can be volunteers, or staff members with whom clients are particularly comfortable. Racial, ethnic, or cultural factors may be important, but just as important is credibility which comes from a history of consistent and fair practice.

SECTION III

OUTREACH: IDENTIFYING, INFORMING, AND INVOLVING POTENTIAL EPSDT CLIENTS

Outreach to the potential clients of EPSDT consists of: identifying eligible families, clearly informing them about the program's benefits, obtaining an agreement from them to participate, making sure that they actually do participate by helping them make and keep their appointment, providing transportation, and generally doing things that facilitate their participation.

IDENTIFYING ELIGIBLE FAMILIES

Identifying eligible families requires planning, organizing, and knowing where and how to look. EPSDT workers have found that the following activities can be successful: searching agency records for the names of eligible clients, asking presently enrolled clients for referrals, and recruiting community leaders to locate eligible clients.

- **Examine client records.** While the welfare or Medicaid agency may provide a list of EPSDT eligible families, you may want to *supplement or crosscheck this list.* Using the Medicaid eligibility criteria of your state as guidelines, you may want to review both the active and inactive public assistance case records to identify possible EPSDT eligible families not on your master list.

- **Ask clients to refer other eligible families.** Each time you contact clients, regardless of the purpose, you briefly should explain EPSDT to them and ask if they want to participate. If a client comes in every six months for redetermination of eligibility and has

refused EPSDT services in the past, those services should be re-offered at *each* subsequent visit. The EPSDT worker should also ask if the client knows of any other families that would be eligible for the program. By briefly explaining the program and asking for referrals, you have opened a possible avenue of communication to the client's neighborhood. Ask the individual who referred the potential client to introduce you to that person so you are not a stranger.

- **Recruit other trusted persons to locate and refer prospective clients.** Develop a set of contacts in the community—persons who know and are trusted by the client population: teachers, social workers, pharmacists, clergymen, etc. Remember that teenagers or young adults may have a different circle of contacts than their parents: Use the right contacts for the person you are trying to reach.

- **Develop your own methods to highlight those most in need of intensive outreach.** Some EPSDT workers have found it useful to adjust their schedules so that more time is spent with clients who are most difficult to recruit. Some clients typically underutilize services, are strangers in the area, or live farthest away from services. These clients may require a special outreach effort. Plan the extent of outreach to fit the type of person and allocate your time accordingly.

INFORM PARENTS OR YOUTH ABOUT THE PROGRAM

The state or local EPSDT agency must provide written notification at least once a year to eligible families receiving AFDC payments about how they can obtain EPSDT services. Newly eligible families should be told about EPSDT at the time their eligibility is determined. Effectively providing information about EPSDT means more,

however, than a formal notification. You should employ a number of different techniques for informing eligible families about EPSDT. The more times and the more ways a person receives a message, the more likely that person is to remember it. Eligible families receiving written notification, a phone call, and a personal visit from an EPSDT worker who talks about the EPSDT program and answers questions, are more likely to remember what EPSDT is, consider the program an important one, and agree to participate. The following techniques have been effective in informing eligible families about EPSDT.

- **Be convincing.** Know your program and know your client. Present information about EPSDT in a way which suits the particular client. (See Appendix A for discussion of promotional techniques in EPSDT.)

- **Take every opportunity to inform eligible families.** Eligible families are likely to have a number of contacts with social service workers and these workers should inform their clients about EPSDT.

- **Make personal contacts.** Face to face contacts give the client a chance to ask questions, and the worker an opportunity to explain the program in detail. Use the telephone if you can't be there in person. (See Appendix B for telephone tips.)

- **Make a special effort to reach teenagers.** Clubs, groups, and organizations with teen memberships, as well as school hygiene and health classes, are natural places for informing and reaching eligible teenagers.

- **Attend community or church groups.** A short talk about EPSDT and answers to questions from local community members can help spread information about this program.

- **Utilize public service announcements on radio and television for getting messages to the general community.** Many radio and television stations donate

free time for announcements about programs such as EPSDT.

- **Use leaflets.** Leaflets can be left in physicians' offices, the offices of service agencies, or posted at local stores and neighborhood meeting places. (See Appendix C for suggestions on how to design effective leaflets and mailers.)

OBTAINING AGREEMENT TO PARTICIPATE

The way you handle the initial contact situation will determine whether or not the client participates in EPSDT. (See Appendix D for a short course on managing the initial contact situation.) The effort spent in finding a client and supplying information about EPSDT may be wasted if the client does not participate, or if obstacles to participation cannot be overcome. Sometimes all that the worker can do has been done, but the client still misses an appointment or becomes a regular "no show."

Experience throughout the country indicates that even after giving a verbal commitment to participate, the client may not fulfill that commitment. There are several techniques to increase involvement. Feel free to experiment with and modify them for local use.

- **Put it in writing.** Sometimes a reminder in writing is all that is necessary. Ask the client to mark the date on a calendar or a bulletin board, or post it on the refrigerator. In other cases, a written agreement between EPSDT and client can help. Since our society values written commitments more than verbal ones, a simple written agreement signed by both client and worker can be used to highlight the responsibilities of both the program and the client. While it is not legally binding, the simple act of putting something in writing underlines its importance and may help a client to keep the appointment. The decision to use such written agreements should be

checked with the EPSDT supervisor and coordinated with agency policy.

- **Find out why the client does not want to participate.** EPSDT workers should not make a client feel guilty about not participating and should help keep the client from becoming defensive or resistant to further discussion of the program. Participation in EPSDT IS voluntary. There is nothing wrong with clients who do not participate. If a client has objections to the program, discuss them with the client. If a client has problems that prevent participation, work with the client to overcome those problems.

- **Respond to the client's objections.** If an objection is based on a misunderstanding, getting the client to restate the objection can give you a chance to introduce correct information and overcome the communication gap. The following example may clarify the point:

EXAMPLE OF RESPONDING TO AN EASY OBJECTION

Client:	No, I guess I'm really not interested. I always take the children for check-ups by our family doctor so it would be a waste of time.
EPSDT worker:	I see. You think the EPSDT program would not serve any purpose since it would only repeat the examination your children receive from your own doctor. Is that correct?
Client:	Yes, it doesn't make sense to get two examinations.
EPSDT worker:	I guess I really didn't make that point clear. You're right of course; repeating the same tests doesn't make sense. The point I failed to make clear is that the EPSDT screening is more comprehensive than most routine checks. It includes additional specialized tests and examinations for which your family doctor would probably have to refer you to a specialist. EPSDT also arranges for follow-through treatment if needed.
Client:	Oh, now I see the difference.

Some objections are not that easy to deal with. The client may have a need which the program is unable to satisfy, or the effort necessary to participate in the program may seem to outweigh the potential benefit. When such an objection goes beyond mere grumbling, the worker may have to begin by agreeing with the objection, and try to deal with it by a re-statement minimizing what is objectionable.

EXAMPLES OF RESPONDING TO A HARD OBJECTION

Objection No. 1:	But, the clinic is all the way across town!
Re-statement:	I can understand that it is inconvenient for you to reach the clinic, but maybe you can get some help with this.
Objection No. 2:	My children are not sick and don't need an examination.
Re-statement:	You think that because your children don't have obvious health problems, a health examination is unnecessary. I can understand this, but did you know that some health problems don't have obvious symptoms until they have developed to the point where they are difficult to treat. EPSDT is designed to detect such problems and ensure that needed treatment is obtained as early as possible. It is available without cost to you. All you have to do is take part in the program and we have made this easier for you by providing for transportation if needed.

While you should try to deal with all of the client's objections, you should also be sensitive to the fact that some clients may agree to participate for the wrong reasons. Some may think that you are telling them that their children are sick and need medical attention. Others may fear that they will lose their welfare checks if they do not participate. It is the EPSDT worker s job to convince the client of the value of participation, not to frighten or pressure the client into participation.

HELPING CLIENTS PARTICIPATE

When a client agrees to participate in EPSDT, a screening appointment should be scheduled within 60 days. The sooner the appointment is made, the better. The longer the wait, the greater the chance of broken appointments. If clients have a clear understanding of the program, they are more likely to participate in it. You can help by doing the following:

- **Tell clients what the program is all about and what options it offers.** If more than one source of screening is available, tell the client what the alternatives are and where they are located. Explain the differences between them.

- **Schedule convenient appointment times.** In order to serve as many people as possible, health service providers keep a fairly tight schedule. They need to know in advance about special problems clients have which might increase the chance of broken appointments. Clients also have schedules, and appointments should be at times convenient for them. It may be easier for a client to keep an appointment if other people familiar to the client attend at the same time. Friends and neighbors may want to obtain health services from the same provider on the same day. Teenagers may resent being included in a program for younger children and may be more interested in participating if they are scheduled on a "teen day" with their peers.

- **Assure attendance at health appointments.** Because broken appointments are a major complaint of health care providers, remind families of their appointments, particularly if considerable time has passed since they were scheduled. Urge clients to let you know if they cannot keep an appointment so that you can inform the provider. If an appointment is broken, it should be rescheduled as soon as possible.

- **Arrange supportive services.** Supportive services include transportation to health care facilities, health education, case management, and child care. Transportation services may mean paying for its costs, providing a bus, arranging a car pool, or actually transporting the client to and from the health care facility. Health education includes explaining screening results, promoting good health habits, and reinforcing a general awareness and interest in health care. Child care services may be needed to enable a parent to take some children for screening or treatment while other children remain home.

- **Make certain that clients bring all important information.** Some programs require clients to bring forms or papers. Workers should check to make sure that clients have necessary forms, records, etc., and that all needed information is brought.

- **Check to see that all eligible children are served.** Some families have a number of eligible children. When appointnents are being arranged, all eligible children should be included.

HERE IS A LIST OF THINGS THAT WORKERS IN EPSDT HAVE DONE TO INCREASE PARTICIPATION

- Schedule the appointment as soon as possible.
- Send a note in the mail and make routine visits or calls to the client the day before to remind him/her of the appointment.
- Help clients arrange for child care services.
- Schedule friends and neighbors at the same time and place.
- Arrange special times for teenagers.
- Provide transportation.
- Help the client go over a checklist of all required information before the appointment.
- Reschedule broken appointments.

CAN YOU THINK OF ANYTHING ELSE THAT YOU MIGHT DO

?

SECTION IV

FOLLOW-UP WITH EPSDT CLIENTS

The success of the EPSDT program depends on providing treatment when it is needed. If eligible children requiring treatment do not obtain it, outreach efforts are of little avail. Follow-up activities designed to ensure receipt of needed treatment consist of:

- identifying clients who are referred for diagnosis and treatment;
- making sure that they understand the importance of the referral;
- removing obstacles which might prevent them from obtaining services;
- monitoring the case to ensure that all needed services are obtained;
- rescheduling so that the child returns for periodic rescreening.

LIMITING DROPOUTS

Keeping in touch with the clients needing additional service is part of follow-up. The records of such clients might be tagged or kept in a separate place. Both recipients and providers could be contacted to make sure that appointments have been made. (Some programs may not want to contact providers. EPSDT workers should check this with their supervisors.) Transportation should be provided if needed. If resistance to treatment arises, it must be dealt with by emphasizing program benefits and by being persuasive.

Some families may drop out of the program if no health problems are discovered during the initial screening. You

should re-contact them and convince them to continue to participate in the program since much of the value and effectiveness of EPSDT is based on periodic re-examination. Rescheduling often requires completion of many of the same tasks as obtaining initial participation. One example of a way to limit dropouts is a cooperative or team approach to follow-up. This approach requires close coordination between service providers and the EPSDT worker. While it is sometimes a difficult approach to implement and may not work in all situations, the following procedures have been used in some programs; they may work for you.

FOLLOW-UP TEAM APPROACH

The team approach depends on health service providers informing EPSDT workers, in writing, of the time and place of their appointment with the client. EPSDT workers can encourage this by routinely giving the provider a return envelope and revisit form to send to the caseworker. Once it has been established that a client has been scheduled for service, both the caseworker and the provider remind the client of the appointment. If for any reason the client cannot keep the appointment the caseworker should be informed, the provider notified, and another appointment set up. This double check system involving both the caseworker and provider requires coordination, but it can minimize forgotten or broken appointments. It also helps caseworkers keep a record of broken appointments which can aid them in identifying clients who may be having problems.

RECORD KEEPING

A key to successful follow-up is the availability of accurate information about the client, his or her other service needs, and those services that have been provided. This means that the EPSDT worker must fill out forms, help clients fill out forms, keep records, retrieve information from existing records, and perform other types of paperwork. While information about the number of clients and the extent of their participation is needed to demonstrate compliance with federal regulations, such information is also used in scheduling follow-up and referral for additional services. Records of the results of screening examinations indicate the need for treatment; infor-

mation about the outcome of treatment is used in arranging additional health and social services; billing information is needed to reimburse providers.

There are several kinds of forms to be filled out: some by the EPSDT worker; some by the client; and others by the health provider. Though sometimes the paperwork may seem tedious, these forms and reports, if properly designed and used, become an integral part of the information system needed to keep the EPSDT program operating smoothly. While forms and recording systems vary, they perform similar functions: helping track clients through the service delivery system, keeping a record of appointments, and ensuring prompt and accurate reimbursement.

If the client is having difficulty filling out necessary forms, the EPSDT worker can help. If forms are incorrectly filled out by the service provider, the worker may "remind" the provider how, why, and when they should be done.

Forms are most helpful when they are designed for easy use and include all needed information. Follow-up forms should indicate: when a subsequent appointment is due, whose responsibility it is to get the client there, whether the client gets there, what is being done to follow-up "no-shows," and what problems may have prevented the client from participating in the program.

Clients who have missed an appointment should be sent a letter immediately to arrange for rescheduling. Reminder letters are also sent to any person with a health problem who has not been seen for a number of weeks. These letters ask the family to contact the EPSDT program. If the family does not respond to letters and subsequent phone calls, an EPSDT worker should visit the family to discuss any problems affecting participation.

A good information system can be the EPSDT worker's most useful tool. Each worker should have his or her own card file arranged by family and tagged or perhaps color coded for easy access. A "tickler" file of clients that must be re-contacted is helpful. No one will do this for you; it is part of your job and is your own set of tools. Use your imagination in designing a follow-up system that will be most effective for you to use.

STEPS IN A GOOD FOLLOW-UP SYSTEM

- Detection of missed appointments as they occur.
- Follow-up call or letter sent immediately.
- Form letter reminders to all persons with health problems who have not been seen for a certain number of weeks.
- Personal visit to family by outreach worker if family does not respond to letters and phone calls.

SECTION V

PRINCIPLES AND ILLUSTRATIONS OF EFFECTIVE CLIENT CONTACT

The following discussion presents a number of principles of effective client contact. The principles are illustrated by examples based on the experience of workers in EPSDT and are followed by some questions highlighting proper application of the principle. Read the principle and illustration and answer the questions on a separate sheet of paper; then turn the page and compare your answers with those in this booklet. The answers for each question appear after the *following* question, so that you will have the chance to answer each question yourself before you see the answer in the booklet.

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PRINCIPLE 1

The key to an effective client contact is discovering what the client needs and showing him or her how the EPSDT program can meet those needs.

ILLUSTRATION

Mrs. A is a mother with four children. She says that she already has a doctor, and since none of her children are sick, she wants to know why she should take them to a health screening clinic.

QUESTION NO. 1

During the initial contact, should you:

A. Try to get Mrs. A to talk about herself, her children, and especially their health?

B. Try to explain what EPSDT is really about?

C. Tell Mrs. A what she really needs?

PRINCIPLE 2

An effective EPSDT worker will attempt to describe features of EPSDT in terms of benefit for the client. This can be accomplished by relating features of EPSDT to client needs.

ILLUSTRATION

Below are two statements about EPSDT.

A. EPSDT was established to provide preventive health care services to children under the age of 21 living in families which would find it difficult to pay for such services.

B. EPSDT is a program designed to provide health services for your children. These services, provided without cost to you, check for health problems which may or may not be visible now but which may affect your child later in life.

QUESTION No. 2

Which statement (A or B) is a benefit statement?

Answer to Question No. 1

A. Try to get Mrs. A to talk about herself, her children, and especially their health.

PRINCIPLE 3

The whole purpose of contacting clients is to assure their participation in EPSDT. The worker's attitude is an important factor in getting the client to become involved in EPSDT. The worker who believes in EPSDT and takes for granted client interest and eagerness to join the program stands a much better chance of getting that participation.

ILLUSTRATION

Below are two examples of a worker talking to a client:

A. I'm really excited about the benefits EPSDT offers to children. I'm a parent myself and know how important it is to deal with health problems before they become severe. That's the whole focus of EPSDT. Furthermore, if you are eligible, it doesn't cost you anything. I would really like your children to get the benefits of this program. When would you like to schedule an appointment for them to be examined?

B. Well, we've talked about EPSDT and I've tried to show you how important this program is for your children. I know you are very busy and I'm sorry to bother you, but I would like to ask you if you want to schedule an appointment for a health examination for your children. The examination probably couldn't be done for a few weeks if you are interested.

Question No. 3

In which example does the worker assume that the client will schedule an appointment?

Answer to Question No. 2.

B. EPSDT is a program designed to provide health services for your children. These services, provided without cost to you, find health problems which may or may not be visible now but which may affect your child later in life.

PRINCIPLE 4

The features of EPSDT which are described to a client should be presented in terms of the client's needs.

ILLUSTRATION

Suppose the client says: "My children are not sick and don't need to see a doctor."

Question No. 4

Which of the following aspects of the EPSDT program would you emphasize in your conversation with the client:

A. That EPSDT is a preventive health program designed to help make sure children, even those who seem well, do not have or develop health problems that can't be easily detected.

B. That EPSDT is paid for by Medicaid and won't cost the client anything.

C. That EPSDT screenings do not take long and would not greatly inconvenience the client.

Answer to Question No. 3

A. I'm really excited about the benefits EPSDT offers to children. I'm a parent myself and know how important it is to deal with health problems before they become severe. That's the whole focus of EPSDT. Furthermore, if you are eligible, it doesn't cost you anything. I would really like your children to get the benefits of this program. When would you like to schedule an appointment for them to be examined?

PRINCIPLE 5

You should summarize all aspects of EPSDT which a client feels will be of benefit. Do not repeat features of the program client does not perceive as beneficial.

By summarizing the particular benefits of EPSDT which a client does perceive as relevant, you ensure that the clients will remember them and participate in the program.

After summarizing the benefits, you should request a commitment for participation in a way which assumes that the client agreed to join the program.

If a client is somewhat interested in EPSDT but still has doubts or reservations, your job is to assure the client that the program really will be beneficial. You must emphasize the program's benefits whenever a client seems doubtful.

In cases where a client expresses doubt in an indirect way, you must learn to read the message behind the words.

ILLUSTRATION

Mrs. B has listened to you describe EPSDT, especially the program feature of screening for conditions which may not have any visible symptoms. She says: "I don't think that my children have any problems like that." She may have some doubts about whether or not the screening can detect such symptoms and may be worried about her children's health. She would rather doubt the program and affirm her children's health than trust the program and find out for sure.

Question No. 5

1. Which of the following things does Mrs. B doubt:
   A. Her children's need for EPSDT services.
   B. The benefit of EPSDT screening.

2. Is detecting health problems for her children important to Mrs. B?

3. Which of the following things should the worker do when the benefit is important but the client doubts that EPSDT can provide it?
   A. Emphasize benefits of EPSDT that the client doesn't doubt.
   B. Demonstrate how EPSDT can provide the benefits which the client doubts.
   C. Agree with the client and make him or her feel good.

Answer to Question 4.

A. That EPSDT is a preventive health program and is designed to help make sure children, even those who seem well, do not have or develop health problems that can't be easily detected.

PRINCIPLE 6

If the features of EPSDT which you have described are perceived by the client as meeting his or her needs, no further proof of program benefits is needed. If, however, the client does not feel that EPSDT provides any interesting benefits, you should not try to prove that the program features you have already described do in fact meet the client's needs. Instead, you should try to find features of EPSDT in which the client is interested.

In order to demonstrate that EPSDT can provide benefits of interest to a client, the worker should:

1. illustrate the benefits;
2. cite the source on which the information is based;
3. mention any relevant facts or figures;
4. show how the program is designed to provide such benefits.

There is, however, a point at which you have to stop "selling" the program and accept the client's decision not to participate. You can, however, recontact the client every six months or every year. Don't drop a client completely, but also learn to take no for an answer, at least for the time being.

ILLUSTRATION

Mrs. C: "My children get a health examination in school every year. I don't think they need another one."

Worker: "Mrs. C, you agree that early detection is important for the effective treatment of children's health problems. Did you know that a recent study points out that most routine health examinations do not check for conditions which are difficult to discover without special tests, even though many children under the age of 12 have such conditions? EPSDT screening is especially designed to discover such conditions.

Question No. 6

Restating benefits shows the client that you have been listening to what he or she has said and that you recognize what is important to him or her. Which of the following statements restates the benefit?

A. A recent study in a popular health magazine has noted that routine health examinations do not check for some conditions.

B. Early detection is important for the effective treatment of children's health problems.

C. EPSDT is designed to detect health problems which routine examinations may miss.

Answer to Question No. 5.

1. B. The benefit of EPSDT screening.
2. Yes.
3. A & B Emphasize benefits of EPSDT that the client doesn't doubt; and prove that EPSDT can provide the benefits which the client doubts.

PRINCIPLE 7

In order to get a client to accept EPSDT you should reinforce or encourage any favorable statement he or she makes about EPSDT. Each favorable statement is like an open door allowing you to describe a program benefit.

ILLUSTRATION

The client says the following things:

A. My family has been going to the same doctor for years and we are very happy with him.

B. I've heard a lot about lead poisoning from paint in old houses; it's good that you're checking for that.

C. You say that your program covers some dental examinations as well?

Question No. 7

1. Which of the above statements would you support?
2. What should you do if the client says something positive about EPSDT?

Answer to Question No. 6.

B. Early detection is important for the effective treatment of children's health problems.

PRINCIPLE 8

The way to encourage a client's favorable comments about EPSDT is:

1. agree with what he or she has said which is favorable to the EPSDT program, and don't get into long arguments when the client raises objections.
2. discuss the relevant benefits of the program which the client favors.

ILLUSTRATION

Client: "I have heard that children should be examined at least once a year and it's good that your program is doing this."

Worker: "You are absolutely right. It's very important for children to receive periodic health examinations and EPSDT is designed to do this. In this way we can keep a continuing record of your child's health to ensure that avoidable problems do not develop."

QUESTION No. 8

1. Which of the worker's statements shows agreement with the client?
2. Which statement expands the program benefit?

Answer to Question No. 7.

1. B. I've heard a lot about lead poisoning from paint in ol houses; it's good that you're checking for that.
2. Agree with client and expand on the positive statemen

REVIEW OF THE PRINCIPLES OF EFFECTIVE CLIENT CONTACT

1. Your attitude is all important. If you approach the client in an apologetic way or show that you expect little enthusiasm about the clients' taking part in EPSDT, the client is not likely to want to participate.
2. Don't be a defeatist. Think positively, and assume that the client will agree to take part in EPSDT. Be ready, however, to deal with clients' objections and resistance.
3. Find out what the client needs from EPSDT.
4. Describe features of EPSDT which can benefit the client by fulfilling his or her needs.
5. If the client has doubts about whether EPSDT can fulfill his or her needs, you must prove the value of EPSDT. Every doubt raised about an area of admitted benefit must be removed by persuasion. You must convince the client that EPSDT does provide what he or she needs.
6. You should concentrate all of your efforts toward getting the client to participate in EPSDT. The contact with the client should end with your scheduling a screening examination.
7. The stages of client contact can be described as:
   a. assessing client needs
   b. presenting a statement of EPSDT benefits
   c. proving the value of EPSDT by removing doubts
   d. summarizing benefits
   e. obtaining an agreement to participate
   f. scheduling screening
   g. discussing and solving problems of broken appointments.

Answer to Question No. 8.

1. You are absolutely right.
2. In this way we can keep a continuing record of your child's health to ensure that avoidable problems do not develop.

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APPENDIX A

THE INITIAL CONTACT

The problems faced by the EPSDT outreach worker are similar to those faced by any person who must explain something new to others: arousing their interest, convincing them that the new idea or program is worthwhile, and having them agree to try it. In some ways an EPSDT worker is like a salesperson who is promoting a new product. In this case, the new product is the service offered by the EPSDT program.

Like the salesperson, the EPSDT outreach worker must locate prospective clients, inform them about EPSDT, and demonstrate how it can meet their needs. The EPSDT outreach worker must then persuade the prospective client of the value of the program.

Although EPSDT services are available to eligible clients without charge, there are indirect costs in time, energy, and inconvenience associated with taking part in the program. Therefore, the EPSDT worker must convince the client that the program is truly worthwhile, and that participating is in the client's best interest. Can you do this? Take an inventory of your own persuasive abilities and pinpoint those skill areas where you need improvement. The questions on the following page may help.

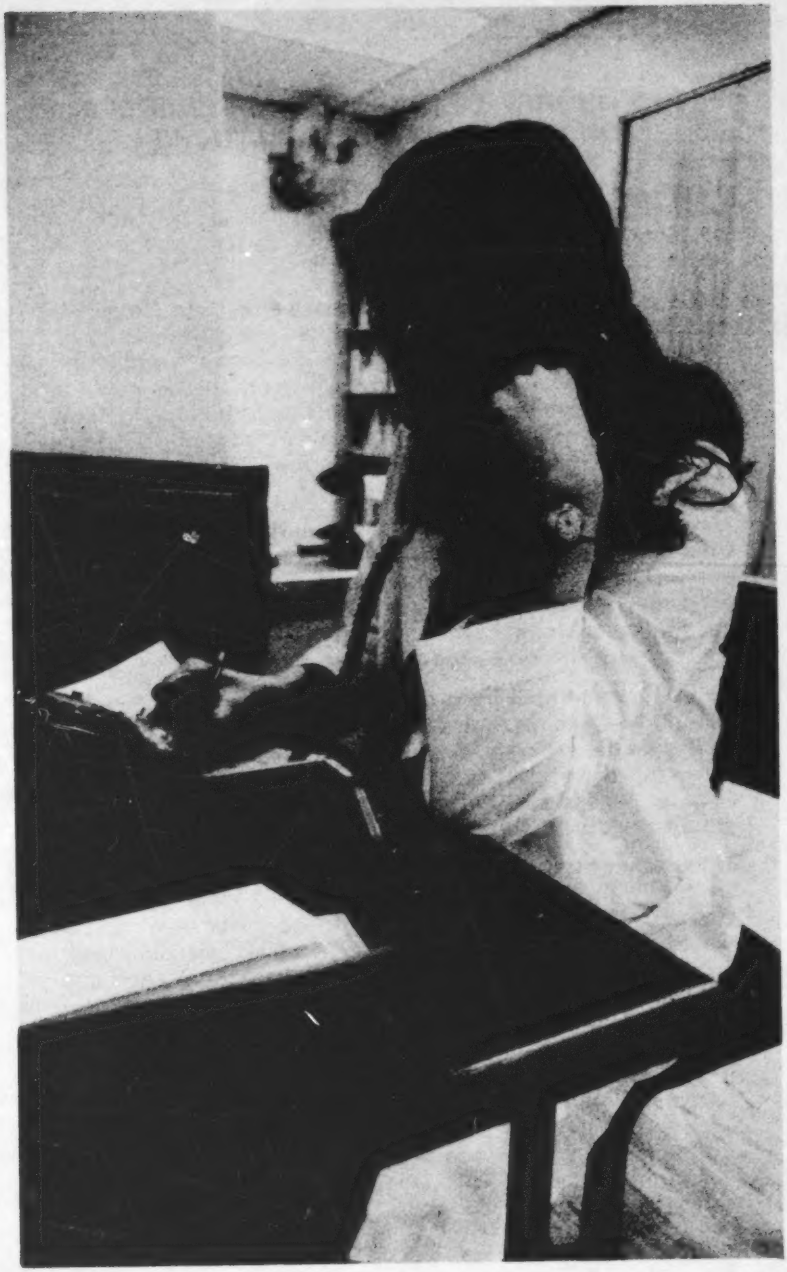
ARE YOU A GOOD EPSDT ADVOCATE?

1. Do you feel that you are annoying the potential client when you try to explain EPSDT?
2. Do you feel that you are overwhelming the potential client with words when you talk about EPSDT?
4. Would you rather be seen as a neutral person by the potential client or as a person who advocates participation in EPSDT?
5. Do you find it difficult to respond to objections raised about participating in the EPSDT program?
6. Can you answer any question which the potential client asks about EPSDT?
7. Are you easily put off by clients who are unwilling to commit themselves to take part in EPSDT?
8. Are you able to describe the good things about EPSDT to a potential client when you make a home visit ?
9. Are you always sure why a potential client decided not to take part in EPSDT?
10. Are you able to describe your visit to a potential client to your supervisor or co-workers so that they will know what happened?
11. Are you able to convince potential clients that EPSDT is beneficial to their children and to them?
12. Are you obtaining participation from as many potential clients as you would like?
13. Would you want your supervisor to hear what you say, how you say it, and see what you do when you contact a potential client?
    If YES—why? If NO—why not?

An answer of "yes" to any of questions 1-8 or "no" to any of questions 9-13 indicates that you could improve how you handle contacts with clients. Even if you are satisfied with your answers and feel that you are an effective field worker, you can do even better by learning how to increase your success in client contract situations. The following tips on how to increase your success may be helpful.

TIPS ON HOW TO IMPROVE YOUR SUCCESS IN CLIENT CONTACT SITUATIONS

- **Control the initial contact situation** by thinking about how the potential client is likely to react to your visit and to the information which you have about EPSDT.
- **Describe EPSDT in a way which speaks directly to the potential client's needs.** To do this, you must ask questions which will help you understand your potential clients' needs, and you must describe EPSDT in ways which emphasize how it is relevant to those needs. Finally, you should be able to know when you have convinced potential clients that EPSDT is important and valuable to them and to their children. Refer to the principles outlined in Section V.
- **Listen to what the potential client is saying and understand what he or she really means.** Listen not only to the words a person says, but also understand and respond to the message behind the words. What problems does a client have which are making participation in EPSDT difficult? What can you say and do to reduce those problems?
- **Gain a commitment from the client to take part in EPSDT, and follow-up to maximize the chance that he or she will actually join the program.** Some potential clients seem to agree that the program is a good thing but still don't want to participate. Others say that they will participate but never do. What can you do about these situations?
- **Enthusiasm can be the road to success.** The enthusiasm you display will greatly influence the client's receptivity to the program. If you simply go through the motions of telling clients about EPSDT, you will not succeed in motivating them to program participation. After all, if you are not excited and enthusiastic about what you have to offer, you cannot expect a potential client to get excited about it. Show that you really care about the health of their children and that you believe EPSDT can help them. When former clients are employed as outreach workers, their enthusiasm and commitment have helped them to be among the most effective workers in their programs. They know and believe in EPSDT because it has helped their children. This belief and enthusiasm is the best kind of salesmanship.



APPENDIX B

TIPS FOR MORE EFFECTIVE USE OF THE TELEPHONE

If clients have telephones, you can contact them by phone; but telephone contacts can also cause problems. Since the telephone is more impersonal than a face-to-face contact, it may be easier for a prospective client to refuse participation in EPSDT by hanging up the phone than it is to say "no" to your face. In person, you can identify a puzzled expression on the client's face and know that you are not fully and clearly communicating your message about EPSDT, but a telephone conversation does not give you the opportunity to evaluate the body language or nonverbal responses of the prospective client. Though it is usually more difficult to interpret silence on the other end of a telephone than in person, there are telephone techniques which can reduce these problems.

TIPS FOR USING THE TELEPHONE

- **Be concise.** In a short telephone conversation you must present all the necessary information about EPSDT without overwhelming the client with words.
- **Outline your presentation on paper.** It may help to write down what you are going to say, and then practice your presentation. Memorize it if necessary and keep it in front of you when making calls.
- **Anticipate possible objections** and have a good response ready (preferably written down in front of you) to overcome the objections.
- **Assume that prospective clients will agree to participate** in the EPSDT program, and offer them only the opportunity to make lesser decisions, such as the day they wish to come in for screening or the time of the appointment.
- **Do not use the telephone as an exclusive technique.** Use it to make personal appointments at which time you can describe the EPSDT program more completely, or when you are sure the prospective client is already highly receptive to the program. Once the client has agreed to participate, the telephone is an effective way to remind him or her of scheduled appointments.

APPENDIX C

USING MAILERS AND WRITTEN PROGRAM DESCRIPTIONS

Sending information through the mail can be an effective way to begin a relationship with prospective clients. It is non-threatening, but it is also impersonal. The following suggestions are tools for increasing the effectiveness of mailed information.

TIPS ON THE USE OF MAILERS

- **Personalize the envelope or the outside of the mailer so that it attracts attention.** The current abundance of "junk mail" makes it necessary to add some personal touch to your mailer simply to keep it from being thrown out unopened.
- **Send the mailer by first-class mail.** Although more expensive, it increases the probability that it will be considered important enough by the recipient to be opened.
- **Leave off the office name in the return address, and hand address the envelope.** Not only does this add a personal touch, but it also requires the recipient to at least open the envelope to satisfy his or her curiosity about the sender.
- **Design the mailer to communicate effectively with the intended recipient.** This means using language the potential client will understand. All too often, writing in social service agencies comes out in "bureaucratic jargon." This jargon may be acceptable inside the agency, but it is not the best way to communicate with clients. Since your purpose is to interest a prospective client in EPSDT, design your message to accomplish this goal. Remember to keep it simple and concrete, and to use a style of language and format most likely to communicate effectively with your target audience.
- **Be creative:** include pictures, drawings, or newspaper articles to make your mailer more interesting.
- **Include a small picture of yourself with your name in one corner.** This will add a personal touch for the clients who already

know you; for the prospective clients who don't know you, it will help them recognize you in the office or if you call at their home.

- **Field test your mailer on a sample of clients whom you already know and also on a sample of potential clients.** Ask clients already enrolled in the EPSDT program, or prospective EPSDT clients, to give you feedback about the mailer. Does it say what you intended it to say? Is it interesting? Will it 'turn-off' prospective clients or interest them in the EPSDT program? Ask the people giving feedback to tell you in their own words what the mailer says. Perhaps you can use some of those words in redesigning the mailer.

- **Keep on revising mailed communications** until you develop the one that is most effective.

To be most effective, a mailed communication should be followed by a personal call or visit. Timing is important, and you should only send mailers to as many people at one time as you can visit during the following week. If you mass mail to prospective clients, some will have completely forgotten your EPSDT mailer by the time you get around to contacting them a second time.

Use of mailers followed by a telephone call when this is feasible can help prevent problems which might arise when clients are not prepared to be contacted. For example, EPSDT workers have reported that clients may view unanticipated outreach visits by EPSDT workers as an attempt to discover welfare fraud. Since unannounced visits can antagonize prospective clients and may cause them to reject the EPSDT program, a mailer followed by a phone call can avoid such misunderstandings.

APPENDIX D

A SHORT COURSE ON MANAGING THE INITIAL CONTACT SITUATION

What should take place during the initial contact with a client? There are five components of such situations: (1) the introduction; (2) identifying the client's needs; (3) supporting, focusing, and summarizing the client's position; (4) enumerating the benefits of EPSDT; and (5) closing the contact in a way which secures a commitment from the client to participate in EPSDT. The approach you use will vary depending upon how well you know the client. Each component is directed toward firming client commitment to join the program.

1 THE INTRODUCTION

If the prospective EPSDT client is someone with whom you already have good rapport, you might begin to discuss EPSDT by mentioning things you know about the client from previous contacts. Your opening might be as follows:

> When I first heard of this new health care program, I immediately thought of you. I know how important your children's health is to you and know that you would agree that good health is the most important thing to give a child. Am I right?

In the preceding example, the conversation is focused quickly on child health care. Perhaps the client has previously expressed worry about his or her children's health. By using your knowledge of this anxiety, you have established a mutual concern about child health.

Next you might discuss the importance of proper health care, again followed by a question with which it would be hard to disagree. Once the client has agreed about the importance of health care, he or she has also implied a commitment to hear about EPSDT because it deals directly with children's health. Thus, in the first few minutes of the contact, you have focused the discussion on the health of the client's children, established that you and the client agree on the importance of this topic,

and obtained an implied commitment from the client to at least hear about EPSDT.

In talking with a prospective client who is not one of your cases, you may have to take a more general approach. If you have sent a mailer about EPSDT, and the prospective client has agreed over the telephone to an appointment, you may begin by confirming your assumption that he or she is interested in children's health. You might phrase it something like this:

> Since you read the information I sent you about this health program, and agreed to talk to me about it, would I be correct in saying that the health of your children is important to you?

This statement accomplishes the same purpose as the first example, but on a less personal basis.

2 IDENTIFYING NEEDS

The next step is to identify the client's needs and describe the benefits of EPSDT which meet those needs. Remember that you will be more successful if you concentrate on the benefits of the program which directly meet the client's needs rather than presenting your own ideas of why EPSDT is a good program.

For example, you may value the idea of free preventive medicine for all children in America. Your prospective client, however, may not care about such a general benefit, but might be very interested in keeping his or her three-year-old healthy and would want to know how EPSDT can benefit the child. Finding out what each client needs is an essential part of effective program promotion.

To identify the client's needs, you must ask questions to start the client talking; open-ended questions may best accomplish this goal. Begin with words such as: how, what, why, where; use questions that cannot be answered with a "yes" or a "no." Seek responses which help the client clarify answers to your initial questions. Get more information with questions like: "Could you tell me some more about this?" or "I don't quite see what you mean, could you explain it more fully?" You may need say no more than a "yes" or a "go ahead," or give a nod encouraging the client to elaborate.

You should help the client focus on what you need to

know or on what will help the client see the benefits of the program. For example, you may wish to know how well clients understand the benefits of preventive health care for children, what they know about EPSDT, and their feelings about the service they have received from social service and health care agencies in the past.

The EPSDT worker should not phrase questions in ways which make the clients feel inadequate if they do not have an answer. For example, inquiring about your prospective client's knowledge of preventive health care by asking "What do you know about health care?" may only succeed in alienating the client and making him or her resistant to any discussion of EPSDT. However, if you start talking about illnesses and ways to prevent them, you may be able to introduce the idea that prevention is sometimes easier and less painful than cure.

3 SUPPORTING, FOCUSING, AND SUMMARIZING

Supporting, focusing and summarizing can reinforce the prospective client's interest in EPSDT.

Supporting reinforces responses from the prospective client which reflect a positive commitment to EPSDT. It consists of such remarks as:

—"Yes, I agree that it is a very important point."

—"I couldn't agree more!"

—"Exactly" (followed by a concise restatement of what the client said).

Focusing condenses a number of remarks into a simple, concrete statement which concentrates attention on the essence or point of what has been said. Focusing can show that you have been listening and helps clarify the client's thoughts. Here are some examples:

—"Then you really feel quite strongly about the health of your children."

—"I can tell you're angry because in the past you have been treated badly by people in social service agencies."

—"What I hear you saying is that anything that can improve your children's health is important to you."

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Summarizing is a way of focusing attention on two or more main ideas. Summarizing the main points helps keep the relevant issues clear for both you and the client. The following example might be a summary of a prospective client's needs:

> So far, you've told me several things you consider to be important: the health of your children is a primary concern; you feel that people should be treated with respect by a social service agency; and you feel you shouldn't have to wait long when you or your children need medical services. Did I include everything?

Such a summary sets the stage for the next aspect of the contact situation—the point at which you introduce benefits.

4 INTRODUCING BENEFITS

Benefits are those aspects of EPSDT designed to meet the client's needs. You decide when to introduce the program's benefits. You may choose to introduce a benefit as soon as a client mentions an important need, or you may wait until a number of prospective needs have been uncovered and summarized before you introduce benefits. EPSDT benefits vary somewhat from one state to another. Write down a list of the specific benefits of your program, then become thoroughly familiar with each of them. These benefits are what you will use to describe EPSDT and convince a client to take part in it.

SAMPLE LIST OF EPSDT BENEFITS

Your list of benefits might include such things as:

Professional care:	The EPSDT program includes the services of respected doctors, dentists, and nurses.
Convenience:	Health services are located in the neighborhood.
Complete health care:	The program provides complete medical services from screening through diagnosis and treatment.
The health of children is important to their future:	EPSDT is an investment in children's future, helping them to have a better chance for a successful and rewarding life.

Whether you choose to introduce one benefit at a time or a group of benefits at once, you must be sure that the benefits you discuss focus on needs which the client has identified. Review the clients' needs and confirm that you have not missed any.

5 CLOSING

By the time that you have identified all of the client's needs, introduced the benefits of EPSDT providing for those needs, and obtained the client's agreement that EPSDT does in fact meet his or her needs, the client may have decided to take part in the program. Although the client's mind *seems* to be made up, commitment may be shaky. Don't risk failure; ask the client for an explicit commitment. If you have honestly represented how EPSDT will meet the needs of your prospective client, you should have no fear of firming the prospective client's commitment to participate in the program.

If you think that the prospective client may put off or completely refuse to make the commitment to the program, you may wish to use the "lesser decision technique." This approach assumes that the prospective client has already agreed to participate and it also offers the opportunity to make a lesser decision between two ways of fulfilling this tacit commitment. Employing this lesser decision technique, you could ask if the client would prefer a morning or afternoon appointment.

When using this approach, follow these steps for best results:

STEPS IN THE LESSER DECISION TECHNIQUE

- **First, SUMMARIZE needs and benefits.** This gives the client an overview of the preceding conversation. The final summary should match each of the client's needs with the program benefit designed to meet that need.
- **Second, obtain AGREEMENT.** The client should agree that each need has been met.
- **Third, offer a lesser alternative DECISION.** This assures that the client has agreed to participate. Develop a list of alternatives. It might include comments like:

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—"Would you prefer to make appointments for both your children at the same time or would separate times be more convenient?"

—"What day next week would be the best for you to take Jimmy to clinic—Wednesday or Thursday?"

—"Would you prefer that someone come to take you to the clinic or would you rather take care of your own transportation?"

When the client answers: "I'd rather take them both in at the same time," or "Wednesday would be best for me, I'm free all day," or "I don't have a car. Could someone give me a ride to the clinic?," he or she has made an implicit commitment to participate in the program. Of course, the response of the client could be negative indicating an implicit objection. Dealing with objections is discussed in Section III of this booklet.

Standard closing techniques focus directly on obtaining a specific commitment from the client to participate or not to participate in the program.

STEPS IN THE STANDARD CLOSING

- **First, summarize** the prospective client's needs and **review the benefits** of the program satisfying those needs.
- **Second, obtain agreement** from the prospective clients that the benefits do in fact satisfy his or her needs.
- **Third, ask the prospective client to participate.** The question of whether or not to participate is clearly stated, and the client is asked for a decision.

To illustrate how the technique might be structured, here is an example of a "standard closing" in its entirety.

EXAMPLE OF STANDARD CLOSING

EPSDT worker: I'm really impressed by what you've told me about your concern fo. the health of your children. I got the sense that you agree that EPSDT can provide the preventive health services your children need. Am I right?

Prospective client: Yes, that's right!

EPSDT worker: But I appreciate that transportation to the clinic and finding someone to care for your mother while you are at the clinic could pose problems. If you remember, I mentioned that the social services department could provide some help in providing care for your mother on the afternoon when you took your children to the EPSDT program.

Prospective client: Good. Since my mother got sick, I can only leave the house for short periods unless I can find someone to care for her. Sometimes Mrs. Johnson will take care of her for me, but I have to pay for it.

EPSDT worker: If you can arrange for Mrs. Johnson to take care of your mother, we can help you out by reimbursing you for her service.

Prospective client: Oh, that would work out just fine.

EPSDT worker: Great! I'm glad we could solve the problem of looking after your mother. Now we should arrange to get the children started in the program as soon as possible. Don't you agree?

(The appointment is then scheduled.)